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Fill in this information to identify your case:		
United States Bankruptcy Court for the: Central District of California		
Caco Harrison (II Milowin):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Joseph	
	Write the name that is on your	First name	First name
	government-issued picture	Duaine	
	identification (for example, your	Middle name	Middle name
	driver's license or passport).	Vargas	
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and doing business as	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any		
	separate legal entity such as a corporation, partnership, or LLC	Business name (if applicable)	Business name (if applicable)
	that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
3.		xxx - xx - <u>3</u> <u>5</u> <u>0</u> <u>0</u>	xxx - xx
	Social Security number or federal Individual Taxpayer	OR	OR
	Identification number		
	(ITIN)	9xx - xx	9xx - xx

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Deb	btor 1 Joseph Duaine Vargas First Name Middle Name Last Name		Case num	nber (if known)	
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.			<u> </u>	
		EIN		<u> </u>	
5.	Where you live			If Debtor 2 lives a	at a different address:
		16550 Valencia Number Str	eet	Number Stre	eet
		Fontana, CA 92	2335-3491 State ZIP Code	City	State ZIP Code
		San Bernardin		City County	State ZIP Code
		If your mailing a	address is different from the one about te that the court will send any notices and address.	e, If Debtor 2's mail	ling address is different from yours, fill not the court will send any notices to you dress.
		Number Str	eet	Number Stre	eet
		P.O. Box		P.O. Box	
		City	State ZIP Code	City	State ZIP Code
6.	Why you are choosing <i>this</i> district to file for bankruptcy	Check one:		Check one:	
	. ,	Over the las have lived in district.	t 180 days before filing this petition, I this district longer than in any other	Over the last have lived in district.	180 days before filing this petition, I this district longer than in any other
		I have anoth (See 28 U.S	ner reason. Explain. r.C. § 1408)	I have anothe (See 28 U.S.	er reason. Explain. C. § 1408)

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Deb	tor 1 Joseph	Duaine	Vargas		Case nui	mber (if known)
	First Name	Middle Na	me Last Name			
Par	t 2: Tell the Court About Yo	ur Bankr	uptcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under	Bankrup Ch		on of each, see <i>Notice Req</i> go to the top of page 1 and		. § 342(b) for Individuals Filing for riate box.
8.	How you will pay the fee	deta chec a cre l nee to P l req judg offic choc	ils about how you may p ck, or money order. If you edit card or check with a ed to pay the fee in insta ay The Filing Fee in Insta quest that my fee be wain e may, but is not required ial poverty line that applie	ay. Typically, if you are pay ur attorney is submitting you pre-printed address. allments. If you choose this allments (Official Form 103, wed (You may request this of to, waive your fee, and mes to your family size and y if ill out the Application to H	ing the fee yourse ur payment on you option, sign and a A). option only if you ay do so only if you you are unable to	rk's office in your local court for more elf, you may pay with cash, cashier's ur behalf, your attorney may pay with attach the <i>Application for Individuals</i> are filing for Chapter 7. By law, a pur income is less than 150% of the pay the fee in installments). If you or Filing Fee Waived (Official Form
9.	Have you filed for bankruptcy within the last 8 years?	☑ No. □ Yes.	District District District	WhenWhen	MM / DD / YYYY MM / DD / YYYY	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑No.	District	When	M / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
11.	Do you rent your residence?	_	No. Go to line 12.			nst You (Form 101A) and file it

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Deb	tor 1 Joseph	Duaine		Vargas			Case number (if known)				
	First Name	Middle Nar	те	Last Name							
Par	t 3: Report About Any Busi	nesses Yo	u Own	as a Sole Propriet	or						
12.	Are you a sole proprietor of	☑ No. 0	o to Par	t 4.							
	any full- or part-time business?	☐ Yes.	Name an	nd location of business							
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a			of busine								
	corporation, partnership, or LLC.	Numb	er	Street							
	If you have more than one sole proprietorship, use a separate sheet and attach it to this	_									
	petition.	City			State)	ZIP Code				
		Chec	Check the appropriate box to describe your business:								
		□ ⊦	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))								
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))								
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))								
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))								
		☐ None of the above									
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)?	proceed to debtor or of operati	<i>inder Sul</i> you are o ons, casl	ubchapter V so that it can choosing to proceed ur	n set appropriate nder Subchapter \	dead /, you	you are a small business debtor or a debtor choosing to lines. If you indicate that you are a small business must attach your most recent balance sheet, statement n or if any of these documents do not exist, follow the				
	For a definition of small business	No.	I am ı	not filing under Chapte	r 11.						
	debtor, see 11 U.S.C. § 101(51D).	☐ No.		filing under Chapter 11, ruptcy Code.	but I am NOT a s	small I	ousiness debtor according to the definition in the				
		☐ Yes.					debtor according to the definition in the inder Subchapter V of Chapter 11.				
		☐ Yes.		filing under Chapter 11,			g to the definition in § 1182(1) of the Bankruptcy				

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Debt	tor 1	Joseph	Duaine	Vargas			Case number (if known) -		
		First Name	Middle Name	e Last Name			,		
Par	t 4: Repor	t if You Own or Ha	ave Any Ha	azardous Property or	Any Prope	rty That Needs	Immediate Attentio	n	
14.	Do you owi	n or have any	☑ No.						
		at poses or is	☐ Yes.	What is the hazard?					_
	imminent a	nd identifiable ublic health or							_
	safety? Or	do you own any							-
	property that needs immediate attention?			If immediate attention is a	needed, why	is it needed?			
		e, do you own loods, or livestock							_
	that must be	e fed, or a building argent repairs?							-
	mai needs t	ngent repairs:		Where is the property?					_
				Where is the property?	Number	Street			-
									_
					City		State	ZIP Code	-

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Debtor 1 Joseph Duaine Vargas Case number (if known). Middle Name First Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling 15. Tell the court whether you About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): have received a briefing about credit counseling. The law requires that you You must check one: You must check one: receive a briefing about credit I received a briefing from an approved credit counseling I received a briefing from an approved credit counseling counseling before you file for agency within the 180 days before I filed this bankruptcy agency within the 180 days before I filed this bankruptcy bankruptcy. You must truthfully petition, and I received a certificate of completion. petition, and I received a certificate of completion. check one of the following choices. If you cannot do so, Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, you are not eligible to file. that you developed with the agency. that you developed with the agency. I received a briefing from an approved credit counseling I received a briefing from an approved credit counseling If you file anyway, the court agency within the 180 days before I filed this bankruptcy agency within the 180 days before I filed this bankruptcy can dismiss your case, you will petition, but I do not have a certificate of completion. petition, but I do not have a certificate of completion. lose whatever filing fee you paid, and your creditors can Within 14 days after you file this bankruptcy petition, you Within 14 days after you file this bankruptcy petition, you begin collection activities MUST file a copy of the certificate and payment plan, if any. MUST file a copy of the certificate and payment plan, if any. again. I certify that I asked for credit counseling services from an I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the circumstances merit a 30-day temporary waiver of the requirement. requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances required you to file this case. required you to file this case. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. ■ I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried to internet, even after I reasonably tried to Active duty. I am currently on active military duty in Active duty. I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of credit counseling with the court. credit counseling with the court.

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Debt	-	oseph rst Name	Dualne Middle N	Vargas Iame Last Name		Case	number	(if known)
Part	6: Answer T	hese Question	s for R	eporting Purposes				
16.	What kind of d have?	ebts do you	16a.			er debts? Consumer debts are for a personal, family, or housel		
			16b.			s debts? Business debts are de rough the operation of the busine		
			16c.	State the type of debts you ow	e th	at are not consumer debts or bu	isiness d	lebts.
17.	Are you filing	under Chapter 7?		No. I am not filing under Cha	pter	7. Go to line 18.		
	exempt proper and administra	stive expenses and will be available	szí			Do you estimate that after any e paid that funds will be available		
18.	How many cre estimate that y			1-49		□ 25,001-50,000 □ 50,0	00-100,0	000 More than 100,000
19.	How much do assets to be w	you estimate you orth?	, M	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		you estimate you ?	, 1	\$100,001-\$500,000		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	_	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part	7: Sign Belo	w						
For	y o u	If I have	chosen	to file under Chapter 7, I am aw	are	enalty of perjury that the informa that I may proceed, if eligible, u each chapter, and I choose to p	nder Cha	apter 7, 11,12, or 13 of title 11, Unite

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Joseph Duaine Vargas, Debtor 1

Executed on 10/27/2023

MM/ DD/ YYYY

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Debtor 1	Joseph	Duaine	Vargas	Case number (if known)
	First Name	Middle Name	Last Name	
represented	torney, if you are d by one ot represented by an ou do not need to file this	proceed under each chapter for 11 U.S.C. § 34	Chapter 7, 11, 12, or 13 of or which the person is eligible 2(b) and, in a case in which	this petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under ole. I also certify that I have delivered to the debtor(s) the notice required by a § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /s/Be	njamin Heston	Date <u>11/02/2023</u>
		•	of Attorney for Debtor	MM / DD / YYYY
		Benjamin Printed na Nexus Ba Firm name 100 Bayv Number	me ankruptcy	
		Newport	Beach	<u>CA</u> 92660
		City		State ZIP Code
		Contact ph	none <u>(951) 290-2827</u>	Email address ben@nexusbk.com
		297798		CA
		Bar numbe	er	State

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Attorney or Party Name. Address, Phone & Fax Nos., State Bar No. & Email	FOR COURT USE ONLY
Benjamin Heston	
Bar Number: 297798 Nexus Bankruptcy	
100 Bayview Circle #100	
Newport Beach, CA 92660	
Phone: (951) 290-2827 Email: ben@nexusbk.com	
☐ Debtor(s) appearing without an attorney	
Attorney for Debtor(s)	
United States B	ankruptcy Court
	ornia - Riverside Division
In re:	
Joseph Duaine Vargas	CASE NO.:
	CHAPTER: 7
	VERIFICATION OF MASTER
	MAILING LIST OF CREDITORS
	[LBR 1007-1(a)]
	[LBK 1007-1(a)]
Debtor(s).	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's a	
that the master mailing list of creditors filed in this bank	ruptcy case, consisting of 1 sheet(s) is complete,
correct, and consistent with the Debtor's schedules and I	I/we assume all responsibility for errors and omissions.
	111/1/ 1/1/
Date: 10/27/2023	
Šigr	nature of Debtor 1
Date:	
Sign	nature of Debtor 2 (joint debtor) (if applicable)
Date:	
	nature of Attorney for Debtor (if applicable)

CHASE CARD SERVICES PO BOX 15298 WILMINGTON, DE 19850-5298

CITIBANK PO BOX 6190 SIOUX FALLS, SD 57117-6190

EDFINANCIAL SERVICES 120 N SEVEN OAKS DR KNOXVILLE, TN 37922-2359

SOFI BANK 2750 E COTTONWOOD PKWY COTTONWD HTS, UT 84121-7284

SYNCHRONY / CARE CREDIT 950 FORRER BLVD KETTERING, OH 45420-1469

SYNCHRONY / PAYPAL PO BOX 530975 ORLANDO, FL 32896-0001

WELLS FARGO BANK PO BOX 14517 DES MOINES, IA 50306-3517

WELLS FARGO DEALER SERVICES PO BOX 71092 CHARLOTTE, NC 28272-1092